



Department of Administration, Conference Room A
One Capitol Hill, Providence
1:00 pm – 3:00 pm
August 20, 2013
Meeting Minutes

Attendees: Meg Curran, Chair, Geoff Grove, Vice-Chair, Secretary Steven Costantino, Christy Ferguson, HealthSource RI Director, Mike Gerhardt, Health Insurance Commissioner Kathleen Hittner, Peter Howland, Linda Katz, Director of Administration Richard Licht, Patrick Quinn
Lt. Governor Elizabeth Roberts

Excused: Amy Zimmerman, Dwight McMillan

- I. The Chair called the meeting to order and moved to approve the minutes from the July 16, 2013 Exchange Advisory Board Meeting. The minutes were approved.
 - a. The Chair welcomed Dr. Kathleen Hittner, the new Health Insurance Commissioner to the Board.
- II. Qualified Health Plan Update: What will be sold on HealthSource RI, Christine Ferguson, Director

Director Ferguson presented an overview of the plans that will be available to individuals and small employers through HealthSource RI. The presentation is available at: <http://www.healthsourceri.com/wp-content/uploads/2013/08/HealthSourceRI-Rates-Presentation-to-Board-08202013.pdf>

The overview of the rates for individuals and small employers will be available on the HealthSource RI website at: www.HealthSourceRI.com

Individual Plans

Director Ferguson noted that the rating rules for plans no longer include gender so comparing the rates from last year to this year is difficult. Additionally, all the plans described will be available to all individuals without access to affordable coverage through their employer. Secretary Costantino noted that, for the first year, Blue Cross/Blue Shield of Rhode Island and Neighborhood Health Plan of Rhode Island (NHPRI) are the carriers on the individual market, with a total of 12 plans available. The plans sold by Neighborhood Health Plan of Rhode Island will only be available this year

to people between 138% and 250% of the Federal Poverty Level. The commercial market is a new area for NHPRI, so HealthSource RI is committed to helping them maintain their solvency and their coverage in Medicaid as well. Tufts Health Plan will begin selling on the individual market through HealthSource RI in January 2015. Director Ferguson noted the goal is to expand the number of carriers and options for individuals by the second year of HealthSource RI.

Small Group Plans: Full Employee Choice

Director Ferguson presented an overview of the plans to be sold to small businesses through HealthSource RI (The presentation is available at: <http://www.healthsourceri.com/wp-content/uploads/2013/08/HealthSourceRI-Rates-Presentation-to-Board-08202013.pdf>)

There are 30,000 small businesses in Rhode Island and approximately half of them offer insurance. Director Ferguson noted that the goal is to have 110,000 employees choosing a health insurance plan for themselves, through the “full employee choice” model being offered. Under the full employee choice model, employers will have the option to select a plan and a contribution level that best fits their budget. Their employees can then select the plan that best meets their needs. Employers will also still have the choice to choose one plan for all of their employees. Rhode Island is one of the only states currently pursuing the full employee choice model.

Employers can still use their brokers to help them and the Contact Center will be available seven days a week. Director Ferguson noted that the carriers in Rhode Island have been incredibly helpful and supportive of this model. Finally, she noted that the work would continue to build upon HealthSource RI as well as transform the health care system in Rhode Island, beyond October 1st.

Lt. Governor Roberts was given the floor and noted that October 1 is a very important date. HealthSource RI will be the face that the public interacts with and is reflective of the work that has been done over the past 18 months. She stated that Rhode Island is faced with an opportunity to transform how we use the system, how we pay for health care and health. There are various state efforts including the Coordinated Health Planning Council and the State Innovation Model, as well as the work of the private sector. Finally, she noted that these efforts are not just about the cost of health insurance, but rather how health care is paid for linked to the delivery and quality of care. She thanked Director Ferguson and the Advisory Board members for their work and urged them to continue to be innovative.

Advisory Board members had a variety of questions.

1. Does COBRA go through the Exchange/HealthSource RI?

- a. The Contact Center and Exchange staff will be able to answer questions but the administration of COBRA has to be done by the employers. We will also continue to partner with brokers who can assist employers.

2. Will the drug formulary be changing?

- a. The exchange did not specify drug formulary for plans. The functionality allowing consumers to search for plans based on provider and type of drugs will not be available right away. If there are issues with coverage from a particular plan, we will be able to track this through the Contact Center.

3. Will behavioral health services be the same for all plans?

- a. Behavioral health and substance abuse services are covered (as essential health benefits) but how plans cover those services are all different and that is important for consumers to think about before choosing a plan. Specifics of what plans cover will initially be available through the carriers' websites. Ultimately that will be available through the HealthSource RI website as well as the carriers.

4. What is the status of the in-person assistance program?

- a. HealthSource RI has signed a contract with the RI Health Center Association (RIHCA) to administer the in-person assistance program (Outreach and Education Support Program) that will help individuals apply and enroll in Medicaid and tax credits. RIHCA will subcontract community-based organizations to serve as in-person assisters.
- b. On small business side, outreach and assistance will take place from business to business and by working with brokers.

5. How will the state premium assistance for parents transitioning from RIté Care to HSRI work?

- a. Director Ferguson noted that this would be discussed at the next meeting

Public Comment

Michelle Copollino, health insurance agent offered public comment in the form of two questions:

1) Can you clarify the requirement of having the employer contribute at least 50% of the single cost of coverage?

Director Ferguson answered that the 50% contribution cost by the employer is determined by the composite rate of all employees (who have applied for the group coverage)

2) What happens with Massachusetts residents who work in Rhode Island? Can they choose a RI plan?

The Director responded that if a Rhode Island employer picks a plan through HealthSource RI then their employees could pick a plan through RI exchange.

The Chair asked if there were any further public comment, hearing none the meeting was adjourned.